

of the best abstracts are already well known to students, e.g. those of Paré, Sims, Osler, Zinsser, etc. Some reflect the repetitiousness of human experience. For example, from Jean Chaptal:

"One day Fressines came to tell me that a cadaver had just been delivered to his particular amphitheater. We went there immediately; I found the body of a young man who had died four or five hours earlier of an inflammation of the lungs. I recognized this young man as having helped me pick up the balls when I was playing pall-mall, and this circumstance made me feel ill at ease. Nevertheless, I set about dissecting him, but at the first stroke of the scalpel on the cartilages that connect the ribs with the sternum, the cadaver placed the right hand on the heart, and the head moved feebly. The scalpel fell from my hands and I fled in fright. From this moment on, I abandoned the study of anatomy."

Some of the most appealing lines are those of Albert Schweitzer in which he explains why he decided to become a medical missionary, how he happened to choose Equatorial Africa as a milieu, and the source of his initial support. A Christian physician.

The authors are medical graduates of the University of Berlin, and have edited "Ciba Symposia," the "Journal of the History of Medicine and Allied Sciences" amongst other interests. The book runs slightly over 400 pages, is neatly finished and can be recommended to all who have a bedside table and a lamp.

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CALCIFIC DISEASE OF THE AORTIC VALVE. By Howard T. Karsner, M.D., and Simon Koletsky, M.D. J. B. Lippincott Co., Philadelphia.

This monograph represents the most complete and up-to-date discussion of the subject available in the literature. The authors present convincing evidence of the rheumatic etiology of calcific disease of the aortic valve. The etiology of this condition has been the subject of controversial opinions in the past and the study presented in the monograph has been greatly needed. Karsner and Koletsky analyze 200 autopsied cases of calcific aortic valve disease with a critical discussion of the clinical features, pathologic anatomy and emphasis on the gross and microscopic stigmata of rheumatic cardiac disease. The authors conclude that definite evidence of rheumatic disease was found in 196 of the 200 cases; in one the evidence was entirely negative while in three the evidence was suspicious.

The scholarly approach to the subject, the well-known authoritarian character of the authors, the statistical data and the excellent pathologic discussion all combine to make this book most valuable. It can be highly recommended to all interested in the subject, and should prove of especial interest to pathologists and cardiologists.

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SYMPTOMS AND SIGNS IN CLINICAL MEDICINE. By E. Noble Chamberlain. Fourth Edition. The Williams & Wilkins Company, 1947. Price \$8.00.

This book is written by an English author primarily for the student who is beginning his work in clinical medicine. As such it inevitably must be compared with American textbooks on physical diagnosis. It goes beyond the usual text on physical diagnosis in that the author has classified symptoms and signs into the various systems of the body and has attempted the further step of discussion of these signs and symptoms as part of some of the commoner or more important pathological diagnoses. He also mentions briefly certain special laboratory or instrumental investigations which may be used to confirm the impression gained by the examiner. In addition, there are short chapters devoted to medical operations and instrumental investigations, radiology and clinical pathology.

In the reviewer's opinion this book compares very favorably with the various standard American texts. In general, it is clearly and concisely written. The paper and printing are good. The black and white illustrations, of which there are a great many, are fairly good; the color photographs are poor; the diagrams are excellent. It is not as complete as some American texts but it has the merit of brevity. And the presentation of signs and symptoms in relation to disease complexes is one which will make the student learn faster.

Too much space, proportionally, has been given to the nervous systems—110 pages, or almost one-third of the total number, exclusive of the special chapters. The cardiovascular system gets only 46 pages and the respiratory system 41. In contrast, the thirteenth edition of Cabot and Adams' *Physical Diagnosis*, a book of 833 pages, allots the nervous system only 67 pages whereas the cardiovascular system gets 171 and the respiratory system 123 pages.

The author's recommendations with regard to special investigation and the chapters on investigations and on clinical pathology require revision to be of practical use to American students. Such instruments as Dudgeon's sphymograph and Mackenzie's polygraph belong to the history of medicine and to any cardiologist who may wish to use them but do not deserve description in a beginner's text. Nor is there practical need for one and a half pages devoted to the estimation of urea in the urine by Little's Nitrometer. Especially when electrocardiography must be contracted into four and one-half pages.

A few passages which the reviewer considers bad may be mentioned. On page 47, after correctly stating that Koplik's spots are located on the buccal mucous membrane the author exhibits a colored plate (borrowed from French's index of diagnosis) which show them on the lower lip! The description of angina pectoris and its differentiation from coronary thrombosis are done in a vague and confusing manner, reminiscent of the knowledge of 35 years ago (pp. 97-98). On page 101 the edema of hypothyroidism and of lymphatic blockage is wrongly ruled not edema but "more solid swelling!" On page 105 the student is advised "if the index finger of each hand is placed on the radial pulse and an attempt is made to obliterate this with the upper finger, the disappearance of the pulse can be noted by the lower finger . . . in cases where instrumental estimation seems unnecessary." The discussion on heart murmurs and their causes is confusing as is such a remark as "allergy also causes a large flabby tongue" (p. 159).

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ATLAS OF BACTERIOLOGY. By R. Cranston Low, M.D., F.R.C.P.E., Bacteriology Department University of Edinburgh, and T. C. Dodds, F.I.M.L.T., Laboratory Supervisor to the Department of Pathology, University of Edinburgh. 168 Illustrations of which 167 are in color. The Williams and Wilkins Company, 1947. Price \$8.50.

This manual consists of colored illustrations portraying the colonial appearance of bacteria on culture media and in stained smears. Direct color photomicrography has been utilized wherever possible but technical difficulties required the preparation of water color drawing in most instances.

The book is obviously a labor of love on the part of the authors and has been beautifully and meticulously prepared and printed. In spite of this fact, it is impossible to recommend it for the purpose for which it was intended: the instruction of the undergraduate in bacteriology. The most satisfactory drawings of bacteria bear little relationship to their actual appearance and cannot be substituted for experience with stained smears and the microscope.

The book was shown by the reviewer to a number of medical students and technicians who had recently completed courses in elementary bacteriology. All agreed that it would have been of no value whatever to them.